_						_	K	·	. 4						
								Application or Docket Number							
	PATENT APPLICATION FEE DETERMINATION RECO														
Effective December 29, 1999 09/67-46 6													66		
		CLA	IMS AS	CRIALL	ENTITY		OTUE	THAN							
(Column 1) (Column 2)									TYPE		OTHER THAN OR SMALL ENTITY				
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	7	RATE	FEE		
BASIC FEE						100 A 100 A 100 A				345.00	OR		600.00		
TOTAL CLAIMS			34 minus 20=			. 14			X\$ 9=		OR	X\$18=	252		
INDEPENDENT CLAIMS			/a minus 3 =			: 3			X39=		٦	X78=	229		
MU	ILTIPLE DEPEN	IDENT	CLAIMPRESENT			. 4				-	-IOR		1 /		
• 18 Ab - difference in oak was die basel							•	+130≂		OR	+260=	L			
* If the difference in column 1 is less than zero, enter *0* in column 2									TOTAL		OR	TOTAL	1176		
CLAIMS AS AMENDED - PART II									OTHER THAN						
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL	ENTITY			
AMENDMENT A		REM	IAINING FTER NDMENT		N PRI	IIGHESY IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL	1	RATE	ADDI/ TIONAL		
DME	Total	. 3	5	Minus	-	37	=	 	X\$ 9=	FEE	OR	X\$18=	FÉE		
¥	independent	. 1	0	Minus	•••	30	•	 	V20			V70	1		
A,	FIRST PRESE	NTATIC	ON OF MI	JLTIPLE DEI	PEND	ENT CLAIM			X39=	/_	OR	X78=	ļ		
Γ,					-			'	+130=		OR	+260=			
Ī	•			• •					TOTAL		OR	TOTAL ADDIT. FEE	·		
	(Column 1) (Column 2) (Column 3)							A	DDIT. FEE	/ 	J - · · ·	ADDIT. FEE			
	CLAIMS HIGHEST							-	/	ADDI-	1	· · · · ·	ADDI		
AMENDMENT B	24.06	AJ	AINING FTER IDMENT		PRE	IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE (TIONAL		RATE	ADDI- TIONAL FEE		
	Total	. :	33	Minus	••	33	= ,		X\$ 9=		OR	X\$18=	, , , , ,		
	Independent		6	Minus	•••		- /	 -		-	~		-		
	FIRST PRESE	NTATIC	ON OF MU	JLTIPLE DEF	PENDE	ENDENT CLAIM			X39=		OR	X78=			
	5/1 m						<u> </u>	+130=	. (OR	+260=				
•	1/30	1/0	S					A	TOTAL DOIT. FEE	- (c. 45	OR	TOTAL ADDIT. FEE			
·			umn·1)		(Co	olumn 2)	(Column 3)								
AMENDMENT C		d	aims Aining		H	IGHEST UMBER				ADDI-	1		ADDI-		
		AF	TER IDMENT	3-432 200	PRE	EVIOUSLY ND FOR	PRESENT EXTRA	1.0	RATE	TIONAL FEE		RATE	TIONAL FEE		
	Total	. 1	B	Minus	••	33	=		X\$ 9= ·		OR	X\$18=			
	Independent	·	Ín	Minus	•••	J_2 .	.		X39=						
4	FIRST PRESE	NTATIC	ON OF MI	JLTIPLE DEF	ENDE	NT CLAIM		-	V23=		OR	X78=			
	I the entry to act or	1 !- 1	# #-		^		:		+130=		OR	+260=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "riighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE															
	if the "Highest Nur The "Highest Num									ropriate box					

FORM PTO-675 (Rov. 12/99)